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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTSFor Other Than An Authorized Committee

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1.	NAME C	OF TEE (in full)	TYPE OR	PRINT ▼		mple: If typi r the lines.	ng, type	12FE	FEC MA E4M5	IL CENTE	R
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ADDRESS (number and street) 1/1/3 Lefferts PL											
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2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲											<u> </u>
	c0	05628	84	3	. IS THIS REPORT	X	NEW (N) OR		AMENDEI (A)	D	
4.	TYPE (Choose	OF REPORT One)		oort 🚨	Feb 20 (M2)		May 20 (M5		Aug 20 (M8	(Nor Year	v 20 (M11) n-Election Only)
	(a) Quarterly Reports:			Ä	Mar 20 (M3)	<u> </u>	Jun 20 (M6)	<u> </u>	Sep 20 (M9	/ (Nor	C 20 (M12) n-Election r Only)
	П	April 15	(O1)	Ц	Apr 20 (M4)		Jul 20 (M7)		Oct 20 (M10	0) Jan	31 (YE)
	n	Quarterly Report July 15	(c)	12-Day PRE-Election		Primary (12	P)	Ge	neral (12G)	Run	off (12R)
	П	Quarterly Report October 15	(Q2)	Report for the	e: 🔲	Convention	(12C)	Sp	ecial (12S)		
		Quarterly Report January 31 Year-End Report	` '	Ele	ection on	N - W /	0 0 0 /	Y # Y #	Y • Y	in the State of	
		July 31 Mid-Year Report (Non-elec Year Only) (MY)	(d)	30-Day POST-Election		General (30	G)	Ru	noff (30R)	Spe	ecial (30S)
		Termination Repo	ort	Report for the	ection on	M • M /	0 0 0 /	7.7.	Y • Y	in the State of	
5.	Covering	g Period	/ O	° ' ' ' ' ' '	7 • 7	through	W 1]′[, ,		
l ce	rtify that	I have examined	this Report	and to the bes	t of my kno	wledge and	belief it is t	rue, corre	ct and comp	lete.	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Tarik Mohamed											
Signature of Treasurer Date Date Date											
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109											
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